

New Jersey Division of Revenue
Amended Limited Partnership Certificate
NJSA 42:2A-1 6

1. Name of Limited Partnership:

2. Identification Number:

3. Date of Filing of the Original Certificate:

4. Article of the Certificate of Limited Partnership is hereby amended to read as follows:

5. Other Provisions:

Signature:

Date:

General Partner:

Name:

Title:

Instructions for Form LP-102
CERTIFICATE OF AMENDMENT
DOMESTIC LIMITED PARTNERSHIPS
(Title 42:2A)

STATUTORY FEE: **\$75**

The MANDATORY fields are:

Field # 1 -- Business Name

List the name as it appears on the records of the State Treasurer.

Field # 2 -- Identification Number

List the ten-digit business ID as it appears on the records of the State Treasurer.

Field # 3 -- Date of Original Filing

List the date that the original limited partnership agreement was filed in the State Treasurer's office.

Field # 4 -- Amendment

List the article from the original certificate that is being amended along with the text of the amendment, including a name change if applicable. If you are changing the name, the name availability provisions apply:

**The name must be distinguishable from other names on the State's database. The Division of Revenue will check the proposed name for availability as part of the filing review process. If desired, you can reserve/register a name prior to submitting your filing by obtaining a reservation/registration. For information on name availability, reservation/registration services and fees, visit the Division's WEB site at <http://www.state.nj.us/treasury/revenue/certcomm.htm> or call (609) 292-9292 Monday-Friday, 8:30 a.m. - 4:30 p.m.

Field #5 -- Other Provisions (as needed)

Specify other information such as the effective date if it is other than the filing date. The effective date cannot be before the filing date nor can it be more than 30 days after the filing date. The filing date is the date the document is received for processing.

EXECUTION (DATE/SIGNATURE)

Have at least one general partner sign. Also, list the date of execution (signature).

* * * * *

These documents should be filed in duplicate. Non-profits should file in triplicate.
Make checks payable to: TREASURER, STATE OF NEW JERSEY. (No cash, please)

Mail to: NJ Division of Revenue, PO Box 308, Trenton, NJ 08625